

DEPARTMENT OF THE ARMY
UNITED STATES ARMY RESEARCH LABORATORY
2800 POWDER MILL ROAD
ADELPHI, MARYLAND 20783-1197

Declaration and Power of Attorney for Original Application

Docket No.: ARL 00-54

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below), or an original, first and joint inventor (if plural names are listed below) of the subject matter, which is claimed and for which a patent is sought on the invention entitled

Apparatus for Generating an Acoustic Signal

The specification of which is attached hereto;

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims;

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56;

No foreign applications for a patent or inventor's certificate have been filed.

POWER OF ATTORNEY: I hereby certify that the Government of the United States of America, as represented by the Secretary of the Army, has an assignment in the invention set forth in this application, and give irrevocable control of this application for Letters Patent to the Government of the United States, as represented by the Secretary of the Army, and appoint the following attorneys to transact all business in the Patent and Trademark Office connected therewith:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME of SOLE or FIRST INVENTOR Christian G. Reiff

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Docket No.: ARL 00-54

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FULL NAME OF FIFTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: _____
POST OFFICE ADDRESS _____
DATE: _____
SIGNATURE: _____

FULL NAME OF SIXTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: _____
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